

Revision: HCFA-PM-97-2
December 1997

ATTACHMENT 2.6-A
Page 4c
OMB No.:0938-0673

State: Texas

| Citation | Condition or Requirement |
|---|---|
| | In determining any excess shelter allowance, utility expenses are calculated using: _____ the standard utility allowance under §5(e) of the Food Stamp Act of 1977; or _____ the actual unreimbursable amount of the community spouse's utility expenses less any portion of such amount included in condominium or cooperative charges. |
| | b. The monthly income allowance for other dependent family members living with the community spouse is: <u>XX</u> one-third of the amount by which the poverty level component (calculated under §1924(d)(3)(A)(i) of the Act, using the applicable percentage specified in §1924 (d)(3)(B)) exceeds the dependent family member's monthly income. _____ a greater amount calculated as follows: The following definition is used in lieu of the definition provided by the Secretary to determine the dependency of family members under §1924 (d)(1): See page 4d. |
| | c. Amounts for health care expenses described below that are incurred by and for the institutionalized individual and are not subject to payments by a third party: (i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments. |
| STATE <u>TX</u> DATE REC'D <u>3-31-98</u> DATE APPEAL <u>4-23-98</u> DATE EFF <u>1-1-98</u> HCFA 129 <u>98-02</u> | (ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amounts are described in Supplement 3 to ATTACHMENT 2.6-A.) A |

TN No. 98-02
Supersedes

Approval Date 4-23-98

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TN No. **SUPERSEDES: NONE - NEW PAGE**

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Condition or Requirement

Item B.3.b. (continued)

Either spouse's minor or dependent children, dependent parents, and dependent siblings (including half brothers, half sisters, and siblings gained through adoption) who were living in an institutionalized client's home before client's institutionalization, and who are unable to support themselves outside the client's home because of medical, social, or other reasons.

SUPERSEDES: NONE - NEW PAGE

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| DATE EFF <u>1-1-98</u> | |
| DATE 2Y <u>98-02</u> | |

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| 435.725 435.733 435.832 | <p>4. In addition to any amounts deductible under the items above, the following monthly amounts are deducted from the remaining monthly income of an institutionalized individual or an institutionalized couple:</p> <p>a. An amount for the maintenance needs of each member of a family living in the institutionalized individual's home with no community spouse living in the home. The amount must be based on a reasonable assessment of need but must not exceed the higher of the:</p> <ul style="list-style-type: none"><input type="radio"/> AFDC level; or<input type="radio"/> Medically needy level: <p>(Check one)</p> <p><input checked="" type="checkbox"/> AFDC levels in Supplement 1</p> <p>-- Medically needy level in Supplement 1</p> <p>-- Other: \$ _____</p> <p>b. Amounts for health care expenses described below that have not been deducted under 3.c. above (i.e., for an institutionalized individual with a community spouse), are incurred by and for the institutionalized individual or institutionalized couple, and are not subject to the payment by a third party:</p> <p>(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.</p> <p>(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amount are described in Supplement 3 to ATTACHMENT 2.6-A.)</p> |
| 435.725 435.733 435.832 | <p>5. At the option of the State, as specified below, the following is deducted from any remaining monthly income of an institutionalized individual or an institutionalized couple:</p> |

A monthly amount for the maintenance of the home of the individual or couple for not longer than 6 months if a physician has certified that the individual, or one member of the institutionalized couple, is likely to return to the home within that period:

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☒ No.

☐ Yes (the applicable amount is shown on page 5a.)

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| _____ | Amount for maintenance of home is: \$ _____. |
| <u>XX</u> | Amount for maintenance of home is the actual maintenance costs not to exceed \$ ____*_____. |
| _____ | Amount for maintenance of home is deductible when countable income is determined under §1924(d)(1) of the Act only if the individuals' home and the community spouse's home are different. |
| _____ | Amount for maintenance of home is not deductible when countable income is determined under §1924 (d)(1) of the Act. |

* the SSI income limit (excluding the \$20 disregard).

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TN No. 98-02
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TN No. 89-31

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Texas

ELIGIBILITY CONDITIONS AND REQUIREMENTS

| Citation(s) | Condition or Requirement |
|------------------------------------|---|
| 42 CFR 435.711 435.721, 435.831 | <p>C. <u>Financial Eligibility</u></p> <p>For individuals who are AFDC or SSI recipients, the income and resource levels and methods for determining countable income and resources of the AFDC and SSI program apply, unless the plan provides for more restrictive levels and methods than SSI for SSI recipients under section 1902(f) of the Act, or more liberal methods under section 1902(r)(2) of the Act, as specified below.</p> <p>For individuals who are not AFDC or SSI recipients in a non-section 1902(f) State and those who are deemed to be cash assistance recipients, the financial eligibility requirements specified in this section C apply.</p> <p>Supplement 1 to ATTACHMENT 2.6-A specifies the income levels for mandatory and optional categorically needy groups of individuals, including individuals with incomes related to the Federal income poverty level--pregnant women and infants or children covered under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(i)(VII), and 1902(a)(10)(A)(ii)(IX) of the Act and aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act--and for mandatory groups of qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act.</p> |

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| HCFA 179 <u>92-10</u> | |

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| <input checked="" type="checkbox"/> X | Supplement 2 to ATTACHMENT 2.6-A specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups. |
| <input type="checkbox"/> | Supplement 7 to ATTACHMENT 2.6-A specifies the income levels for categorically needy aged, blind and disabled persons who are covered under requirements more restrictive than SSI. |
| <input type="checkbox"/> | Supplement 4 to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act. |
| <input type="checkbox"/> | Supplement 5 to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that have more restrictive methods than SSI, permitted under section 1902(f) of the Act. |
| <input checked="" type="checkbox"/> X | Supplement 8a to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act. |
| <input type="checkbox"/> | Supplement 8b to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under section 1902(r)(2) of the Act. |
| <input type="checkbox"/> | Supplement 14 to ATTACHMENT 2.6-A specifies income levels used by States for determining eligibility of Tuberculosis-infected individuals whose eligibility is determined under §1902(z)(1) of the Act. |

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| DATE | <u>06-18-97</u> | |
| DATE | <u>04-01-97</u> | |
| HCFA 179 | <u>97-04</u> | |

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Supersedes 96-12
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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Texas

ELIGIBILITY CONDITIONS AND REQUIREMENTS

| Citation(s) | Condition or Requirement |
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| 1902(r)(2) of the Act | <p>1. <u>Methods of Determining Income</u></p> <p>a. <u>AFDC-related individuals (except for poverty level related pregnant women, infants, and children).</u></p> <p>(1) In determining countable income for AFDC-related individuals, the following methods are used:</p> <p>— (a) The methods under the State's approved AFDC plan only; or</p> <p><u>XX</u> (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.</p> <p>(2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.</p> |
| 1902(e)(6) the Act | <p>(3) Agency continues to treat women eligible under the provisions of sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.</p> |

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| DATE APP'D <u>AUG 23 1996</u> | |
| DATE EFF <u>APR 01 1996</u> | |
| HCFA 179 <u>96-12</u> | |

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TN No. 92-10

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Texas

ELIGIBILITY CONDITIONS AND REQUIREMENTS

| Citation(s) | Condition or Requirement |
|---|---|
| 42 CFR 435.721 435.831, and 1902(m)(1)(B)(m)(4) and 1902(r)(2) of the Act | b. <u>Aged individuals.</u> In determining countable income for aged individuals, including aged individuals with incomes up to the Federal poverty level described in section 1902(m)(1) of the Act, the following methods are used: <u>XXX</u> The methods of the SSI program only. <u> </u> The methods of the SSI program and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u> |

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| DATE EFF <u>APR 01 1992</u> | |
| HCFA 179 <u>92-10</u> | |

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| <input type="checkbox"/> | For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> ; and any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> . |
| <input checked="" type="checkbox"/> | For institutional couples, the methods specified under section 1611(e)(5) of the Act. |
| <input type="checkbox"/> | For optional State supplement recipients under \$435.230, income methods more liberal than SSI, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> . |
| <input type="checkbox"/> | For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements-- — SSI methods only. — SSI methods and/or any more liberal methods than SSI described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> . — Methods more restrictive and/or more liberal than SSI. More restrictive methods are described in <u>Supplement 4 to ATTACHMENT 2.6-A</u> and more liberal methods are described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> . |
| | In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses. |

TN No. 91-34 Approval Date JAN 14 1992 Effective Date OCT 01 1991
Supersedes
TN No. 89-22, Attachment 2.6-A, pg 6
89-10, Attachment 2.2-A, pg 66, last p
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| HCFA 179 <u>91-34</u> | |

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State: Texas

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| 42 CFR 435.721 and 435.831 1902(m)(1)(B), (m)(4), and 1902(r)(2) of the Act | c. <u>Blind individuals.</u> In determining countable income for blind individuals, the following methods are used: XXX The methods of the SSI program only. — SSI methods and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u> — For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> , and any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u> XXX For institutional couples, the methods specified under section 1611(e)(5) of the Act. — For optional State supplement recipients under \$435.230, income methods more liberal than SSI, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A.</u> — For optional State supplement recipients in section 1902(f) States and SSI criteria States without section 1616 or 1634 agreements-- — SSI methods only. — SSI methods and/or any more liberal methods than SSI described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u> — Methods more restrictive and/ or more liberal than SSI. More restrictive methods are described in <u>Supplement 4 to ATTACHMENT 2.6-A</u> and more liberal methods are described in <u>Supplement 8a to ATTACHMENT 2.6-A.</u> |

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TN No. 89-22, Attachment 2.6-A, pg 7, item C
87-10, Attachment 2.6-A, pg 13, item 10. c.
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